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## **Application Data Sheet**

### **Application Information**

Application number:: 09/945,261  
Filing Date:: August 31, 2001  
Application Type:: Regular  
Subject Matter:: Utility  
Suggested classification::  
Suggested Group Art Unit::  
CD-ROM or CD-R??:  
Number of CD disks::  
Number of copies of CDs::  
Sequence Submission::  
Computer Readable Form (CRF)?::  
Number of copies of CRF::  
Title:: IDENTITY VERIFICATION USING BIOMETRICS  
Attorney Docket Number:: 020976-2.00US  
Request for Early Publication:: No  
Request for Non-Publication:: No  
Suggested Drawing Figure:: 1  
Total Drawing Sheets:: 3  
Small Entity?:: Yes  
Latin name::  
Variety denomination name::  
Petition included?:: No  
Petition Type::  
Licensed US Govt. Agency::  
Contract or Grant Numbers One::  
Secrecy Order in Parent Appl.: No

### **Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Shawn  
Middle Name:: J.  
Family Name:: Bradley  
City of Residence:: Missoula  
State or Province of Residence:: MT  
Country of Residence:: US  
Street of Mailing Address:: 3314 Stephens Avenue  
City of Mailing Address:: Missoula  
State or Province of mailing address:: MT  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 59801

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Richard  
Middle Name:: F.  
Family Name:: Peralta  
City of Residence:: Stevensville  
State or Province of Residence:: MT  
Country of Residence:: US  
Street of Mailing Address:: 4618 Watt Lane  
City of Mailing Address:: Stevensville  
State or Province of mailing address:: MT  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 59870

### **Correspondence Information**

Correspondence Customer Number:: 20350

### **Representative Information**

Representative Designation::	Representative Number::	Representative Name::
Primary	31,990	Steven W. Parmelee
Associate	48,750	Ardeshir Tabibi
Associate	45,068	Barmak Sani

### **Assignee Information**

Assignee Name::  
Street of mailing address::  
City of mailing address::  
State or Province of mailing address::  
Country of mailing address::  
Postal or Zip Code of mailing address::